

**301 Expectoration of sputum – a simple concept becomes a troublesome issue?**

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**Background:** The microbiological results of analyses of respiratory secretions is crucial to the management of infective exacerbations, eradication of new pathogens and to assist cross-infection control practice in cystic fibrosis. It is recommended that sputum/cough swabs should be obtained for each routine clinic visit and at the onset of any sign of respiratory infection [1], but the evidence purports cough swabs may not be representative of lower airway infection [2]. We have observed increasing difficulty in obtaining these essential sputum specimens from patients.

**Aims:** To identify all patients with physical or psychosocial issues related to sputum expectoration.

**Method:** All patients' records were analysed retrospectively for recorded sputum issues, gender, age, age at diagnosis, and reported sputum load.

**Results:** A total of 59/329 (18%) recorded sputum issues. There was no significant difference between males and females 27/186 v 32/143. Mean (SD) age at the time of the study for those with issues v those who did not 25.9 (7.3) v 30.1 (9.3) years  $p=0.004$ . The majority 49/59 (83%) had been diagnosed between 0–5 years old. 23/59 (39%) reported no sputum load, 6/59 (10%) reported swallowing secretions and 30/59 (51%) reported regular sputum production.

**Conclusion:** Sputum expectoration is an issue for a significant cohort of our patients. This is despite the majority being diagnosed and receiving CF specialist care from early childhood. The problem was increasingly evident in the younger cohort of patients and with sputum producers. A study is in progress to examine these issues with patients and professionals at paediatric and adult centres.

**Reference(s)**

- [1] Cystic Fibrosis Trust, 2001.  
[2] Whitaker et al., 2008.

**302 Associations between walking distance and quality of life in children with CF**

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**Introduction:** During annual check up in patients with Cystic Fibrosis exercise capacity and quality of life are assessed. The aim of this study was to examine the exercise capacity, quality of life and their associations.

**Methods:** 40 children with CF filled in the Cystic Fibrosis Questionnaire (CFQ), and performed the Shuttle Walk Test (SWT). Descriptives and Spearman correlations were calculated.

**Results:** 40 children mean (SD) age 8.9 (2.6), 17 boys and 23 girls, mean (SD) FEV1 85.8 (21.6). Mean (SD) walking distance was 737m (233), and 792m (211) in boys and 687m (246) in girls. Mean (SD) CFQ scores were: Physical 74.4 (21.3); Emotional State 79.3 (12.9); Eating 71.2 (23.2); Treatment Burden 74.6 (21.4); Social 77.2 (16.6); Body Image 85.9 (19.2); Respiratory 78.7 (13.1); Digestion 76.0 (21.3).

No association was found between FEV1 and any of the quality of life domains, nor with the SWT. Correlations between SWT and CFQ varied from 0.10 [ns] to 0.54\*\*, and were statistically significant in 4 of the 8 QoL domains.

**Conclusions:** The walking distance and the quality of life of children with mild CF were moderately decreased. Lung function was not associated with walking distance and quality of life. Patients with a higher walking distance showed higher physical and social functioning and less eating problems and treatment burden.

**303 Singing and Cystic Fibrosis: A pilot experience at Centre de Perharidy (Roscoff, France)**

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In 2003 the idea was expressed that singing could improve the quality of life of CF patients via physiological, psychological and social benefits.

**Aims:** To propose and justify this activity for CF patients.

**Methodology:** Music workshops were started in 2004 (by a music therapist and 2 musicians) accessible to all patients with multiple pathologies.

In 2006 a working group was created to reflect on and start a project specifically for CF patients. This group included a patient, a representative of patients, a music therapist and medical professionals (psychologist, doctor, nurse, physiotherapist). The working group created a map mind for singing activities. Review of literature via PubMed can find no similar experience apart from an individual physiotherapists' research topic.

"Discovering Vocal Expression" workshops were begun for CF patients in 2006; this activity is proposed in the patients' hospital room during hospitalisation or in the day-hospital for outpatient visits (since 2008). Sessions last about 30 minutes.. relaxation, breathing, control of breath and vocal exercises: then singing.

**Results:** Up to now, this activity has been proposed to 77 patients and 74 have been keen to participate. This surprisingly high rate of participation (96%) is an indication of success. The non-quantifiable benefits are clearly expressed by the patients and professionals. Patients testify as follows: "singing helps my breathing capacity, I breathe differently now" it's complementary to my physiotherapy and FUN".

**Perspectives for the future:** To extend this activity to other centres. To identify other teams who may have similar projects and exchange with them.

**304 Complementary Therapy: Planning a service for adults with Cystic Fibrosis**

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Our Palliative Care Working Party identified a need for complementary therapy (CT). Funding was secured for a 6 month trial of 3 hours/week, provided by outside therapists. The therapies included; massage, Indian head massage, reflexology and pamper sessions.

**Aims:** To survey the demand for and benefits of CT for inpatients between July–December 2008, in order to plan a future service.

**Methods:** Patients with long or frequent admissions and or specific relaxation issues were prioritised. An anonymous questionnaire was administered to 2 groups. Gp 1, 17/21 (3 died & 1 transplanted) who received therapy and Gp 2, 21/21 who did not. Gp 2 was inpatients at the same time as the prioritised patients. Gp 1 was asked questions relating to benefits, importance, type and length of treatment and preferences relating to provider and Gp 2 about interest, perceived benefit and provider. Data was collected for number and type of therapies and inpatient days (IPD) over 12 months.

**Results:** All 75 treatments offered were accepted; massage 45, reflexology 21, Indian head massage 2, pamper 7. Mean (range) IPD for Gp1 and Gp2 were 119(9–325) and 24(5–62). 10 and 9 questionnaires have been analysed to date for Gp1 and 2. No patient refused. 10/10 in Gp1 rated CT as important, would like more sessions and would be unhappy if CT was withdrawn. In Gp 2, 9/9 were interested. General and muscular relaxation were considered the most common benefits by both groups. Relief of boredom and seeing a 'fresh face' were also rated as benefits. 3/10 and 4/9 expressed a preference for outside therapists over the inpatient team.

**Conclusion:** Inpatients consider CT to be important, would like more sessions and may prefer outside therapists. The data analysis is ongoing and will guide our future service.